

30 ROCKEFELLER PLAZA 44TH FLOOR BAKU NEW YORK, NEW YORK DALLAS 10112-4498 **HOUSTON** 212.705.5000 LONDON FAX 212.705.5020 MOSCOW **NEW YORK** WASHINGTON Amdt. Trans.

**PATENT** 

Our File No.: <u>A32287 PCT/USA 071986.0197</u>

Date: April 25, 2000

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of	`:	Eduard Mülleder et al.					
Serial No.	:	09/244,323	Examiner	: L. Tentoni	îTC		
Filed	:	February 3, 1999	Group Art Unit	: 1732	1700	RE	
For	:	METHOD OF PRO	DUCING CELLU	LOSE FIBER	SAA	CEIN	
Assistant Commissi Washington, DC 20		r Patents			2000 - ROOM	(ED	

Sir:

Transmitted herewith is an amendment in the above-identified application.

1.	[]	verified statement previously submitted.
2.	[]	A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.
3	ſΊ	No additional fee is required

## **CERTIFICATE OF MAILING**

I hereby certify that this paper is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231, on April 25, 2000.

Attorney Name Marta E. Delsignore	Registration No. 32,689
Signature Marta & Welsianie	Date of Signature April 25, 2000

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NY02:259765.1

## The fee has been calculated as shown below:

	Claims remaining after amendt.	Highest No. Prev. Paid for		Present extra		SMALL ENT	<u>ITY</u>			THER TH	
	(Col. 1)	(Col. 2)		(Col. 3)	RAT	<u>E</u>	<u>FEE</u>	<u>or</u>	RA'	<u>re</u>	FEE
Total	*	Minus **	=	0 .	x	9 =		<u>or</u>	x	18=	\$0
Ind.	*	Minus ***	=	0	x	39 =		<u>or</u>	x	78 =	\$0
() First	Presentation of	Multiple Dependent C	Claim		+	130 =		<u>or</u>	+	260 =	\$0
			TOTAL AD	DITIONAL FEE		=		<u>or</u>	TO	ΓAL =	\$0

- \* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- \*\* If the "Highest No. prev. paid for" in this space is less than 20, write "20" in this space.
- \*\*\* If the "Highest No. prev. paid for" in this space is less than 3, write "3" in this space.
  - 4.(a)[X] An Extension of Time to respond to the PTO communication dated February 8, 2000 is hereby requested. The required fee, indicated below, is enclosed herewith.

Extension for response (check only one):

	<u>SMA</u>	ALL ENTITY	OTHER THAN A SMALL ENTITY		
Within first month	[]	\$ 55	[]	\$ 110	
Within second month	[]	190	[X]	380	
Within third month	[]	435	[]	870	
Within fourth month	[]	680	[]	1,360	

(check and complete the next item, if applicable)

[] An extension for months has already been secured and the fee paid therefor of \$ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$380.00.

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(b)[X] In the event that an extension of time is required, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.

- 5. [] Please charge our Deposit Account No. 02-4377 in the amount of \$. Two copies of this sheet are enclosed.
- 6. [X] A check in the amount of \$380.00 is attached.
- 7. [X] The Commissioner is hereby authorized to charge payment of any additional filing fees required under 37 CFR 1.16 and/or 37 CFR 1.17 associated with this communication or credit any overpayment to Deposit Account No. 02-4377. Two copies of this sheet are enclosed.

BAKER BOTTS L.L.P.

y Marta F Delsignore

PTO Registration No. 32,689

**Enclosures**